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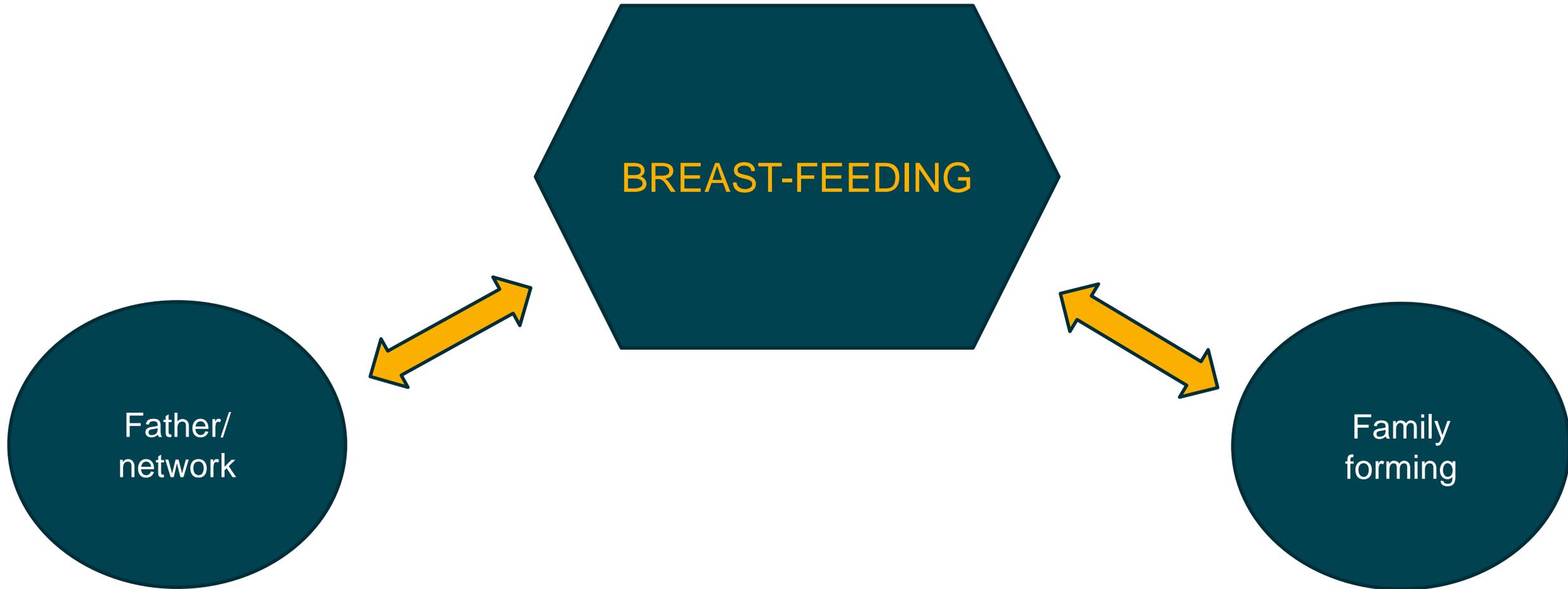
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Study Visits 18-20 November 2019

Session: Breast-feeding, Family Forming and the Father

This sessions agenda

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Breast-feeding in a worldwide perspective

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WHO 2017:

- Globally, only 40% of infants under six months of age are exclusively breastfed.
- Child lives could be saved by increasing breastfeeding mothers.
- In 2017 WHO made 10 facts of breastfeeding as breastfeeding is one of the most effective ways to ensure child health and survival.
 - Breast-feeding for the first six month is crucial, and breastfeeding should be initiated within the first hour post-partum
 - Breast-feeding has long-term benefits for children (prevents overweight, obesity and diabetes)

Education: Breast-feeding in a broader context

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Subjects that are part of the breast-feeding context at the Danish midwifery school:

- Midwifery care
- Care for the newborn baby and the physical abilities of the newborn
- Communication in healthcare
- Ethics
- Psychology
- Health education
- Health promotion
- Family planning
- The father

What is health promotion?

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WHO (1984):

- Health promotion is the process of enabling people to increase control over their health and improve it.

Health promotion approaches:

- Preventive
 - Discussion about the health promotion advantages of breast-feeding
- Educational
 - How information is provided – information must be tailored to meet the individual needs of the mother and father.
- Client-centred
 - The mother and father are at the centre of the interaction with the midwife.
 - Empowerment is integral to this approach. The mother and father are encouraged to utilize personal strength towards the success of breast-feeding.



Health promotion – an approach when guiding and counselling on breast-feeding

Health education

- In dialogue with the woman
 - The purpose is to reveal the resources of the woman (e.g. how is the woman's competency to act)
- Involving the father and/or network of the woman
 - The purpose is to underpin that breast-feeding is a family affair and that support from the partner will enhance successfully breast-feeding for at least 6-12 month
 - The purpose is also that involving the partner will increase the relation and bonding between the partner and the child



Health promotion – an approach when guiding and counselling on breast-feeding

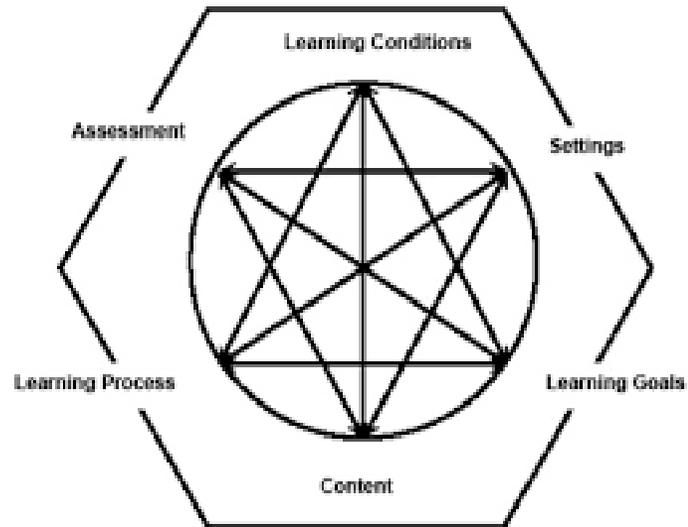
- Dialogue about breast-feeding with the woman begins in pregnancy at the antenatal care.
 - Generally around gestation age 29 or at antenatal group-sessions about breast-feeding.
 - If the partner participates, he will be involved – Important as knowledge about breastfeeding will support the parent's competencies to act.
- Dialogue will also be part of the information and guiding in the specific breast-feeding occasion e.g. postpartum at hospital within the first two days.
 - The father is encouraged to take part in the practical arrangement of e.g. a good breast-feeding position of the woman and child and e.g. being aware of the child sucking correctly.

Didactic

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Pedagogical methods –
Hiim and Hippes didactically Relationship Model
– a learning design



Dialogue

- What is the breast-feeding culture in Cambodia and Vietnam?
- How long do women in Cambodia and Vietnam breast-feed their children?

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Small sections, from the topic 'Breastfeeding', to show, how are Danish midwifery students taught

Breastfeeding – antenatally

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- Contributing to support and educate women and their partners, throughout both the antenatal and immediate postnatal period
- Discussion regarding infant feeding during the antenatal period, with the woman and the father
 - Their hopes and aspirations
 - Explore their knowledge on breastfeeding, their expectations and wishes
 - How to overcome common breastfeeding challenges
- Supporting to get breastfeeding off to a good start in the very early days
 - Skin to skin contact
 - How to respond to the baby's needs
 - Importance of face-to-face support, before and after the birth, by trained breastfeeding professional or peer counsellor

(Macdonald S & Johnson G (red.) 2017.)

The father

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Rempel and Rempel. 2010. *The Breastfeeding Team: The Role of Involved Fathers in the Breastfeeding family.*

- 21 fathers involved in breastfeeding volunteered to be interviewed about their roles regarding breastfeeding and in the family
- Important result: the professionals must acknowledge the fathers as members of the breastfeeding team

Results

(Remple and Remple. 2010)

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About the breastfeeding

- Pleasure knowing the benefits for the baby
- Teamwork
- Encouragement to continue breastfeeding
- Knowledge about breastfeeding
- Valuing the breastfeeding mother
- Household support and assistance to the mother while breastfeeding

Being the father of a breastfed baby

- Waiting for his 'turn'
- Bonding in the feeding zone
- The father can bring so much to the table
- Supporting the mother reduced her stress
- Fathers were an emotional support for the mother
- The fathers found their own roles

Topics for conversation

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- Encourage the parents to get to know their unborn baby; name, moments, the unborn baby's competences
- Talking about feeding can build the mothers confidence
- Exploring the options available to them, can help make them make decisions about the support they are going to need
- The father's knowledge, influence on duration of breastfeeding

Just after the birth:

- Value of undisturbed skin to skin contact immediately after birth and the first feed
- How to respond to the baby's needs
- Knowledge on how to meet their babies needs position the baby at the breast

(Macdonald S & Johnson G (red.) 2017.)

Supporting infant feeding immediately after birth

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- Healthy newborns can instinctively move to the mother's breast and attach on their own
- Benefits of early breastfeeding:
 - Colostrum which is the rich and protective first milk
 - helps contract the uterus and speeds up the birth of the placenta
 - Helps bonding with the baby
- Why is skin to skin important:
 - Keeping the baby at perfect temperature
 - stimulates the babies feeding instinct
 - Helps bonding with the baby, this can also be done by the father

(Macdonald S & Johnson G (red.) 2017.)

Supporting breastfeeding immediately after birth

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- Place the baby on the mother's abdomen, dry of the baby and cover it with a clean dry cloth – important: do not dry the baby's hands
- As it is most natural for the baby to move forward, it should be positioned its mouth is below the nipple
- The baby finds the breast using her sense of smell – amniotic fluid and the mother's nipple has a similar smell
- Some babies are active right away and some need to rest for a little while, both are natural
- The baby is left quiet and undisturbed for at least an hour after birth, or until after the first feeding

Supporting breastfeeding immediately after birth

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- It is important that the midwife does not try to help the baby to the breast, by moving it or pushing the back of the baby's head. This may confuse the baby and slow down the natural attachment to the breast
- The baby should be attached deeply to the breast, as shown in this small video:
- <https://www.youtube.com/watch?v=wjt-Ashodw8>

The baby's breastfeeding signals

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These movements can be signs that the baby is getting ready to attach itself at the breast:

- Opening its mouth wide
- Bringing its hand to its mouth; the baby will suck its hand, but this can also be part of finding the mother's breast
- Using its sense of smell, which is well developed at birth
- Moving towards the breast
- Exploring the nipple area with its tongue
- Looking at the mother – the baby has limited vision

It is important to know that the baby will feed until it is finished

(Macdonald S & Johnson G (red.) 2017.)



A pedagogical activity

- (For the students) Use 2-3 minutes for this exercise:
- Explain to the person next to you how fathers see their role in breastfeeding, and discuss how you can support him in this
- Explain to the person beside you how the midwife can support early breastfeeding immediately after the birth

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Thank you for your attention :-)

References



- Hiim and Hippe, Didactic relationship model:
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